PTO/SB/82 (01-06)
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I hereby revoke all previous powers of attorney given in the above-identified application.								
A Power of Attorney is submitted herewith.								
OR I hereby appoint the practitioners associated with the Customer Number: 03000								03000
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I am the: Applicant/Inventor. Assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96)								
SIGNATURE of Applicant or Assignee of Record								
Signature And H								
Name	Gregg Kerlitz	egg Keyfitz, VP of Operations						
Date	11-26-07			Te	elephone	717-	355-8	740
NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.								
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Interest to Comment (1997) where are accumulated to the comment (1997) in contraction of information is required by 37 CFR 1.38. The Information is required by 38 CFR 1.38. The Information CFR 1.38. The I